

FAMILY PLANNING INVESTMENT IN NIGERIA

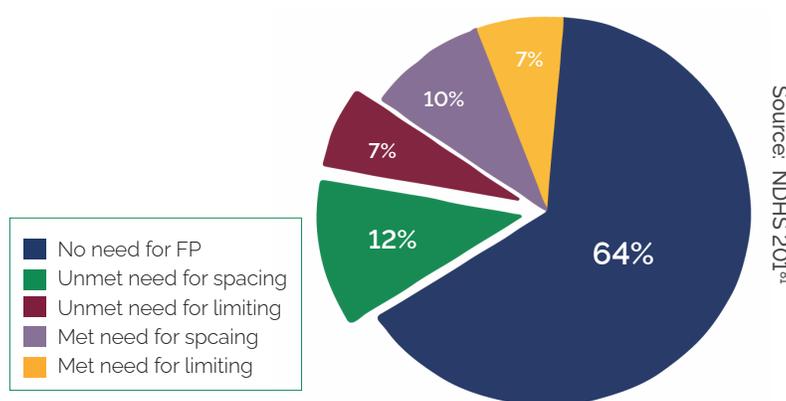
The key to harnessing the demographic dividend and sustainable economic growth

The problem: Low contraceptive prevalence rate and high unmet need for FP

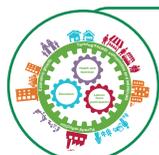
Out of about 47 million women of reproductive age (WRA) in Nigeria, 36% of currently married women have a demand for family planning. However, 19% have an unmet need for family planning and this is much higher among unmarried sexually active women at 48%. The modern contraceptive prevalence rate (mCPR) is only 12% among married women and 28% among unmarried sexually active women.¹

The Government of Nigeria has recognised the need to invest in family planning as a key strategy to achieve its health and wider development goals.

Figure 1: % Distributor of Currently Married Women Age 15-39 by Need for Family Planning



COMMITMENTS MADE BY THE FEDERAL GOVERNMENT



NATIONAL HUMAN CAPITAL DEVELOPMENT (HCD) VISION

The Federal Government has articulated a Vision to accelerate HCD by 2030, which includes a target to increase the mCPR to 36% by 2030²



ABUJA DECLARATION

In 2001, the Federal Government committed to allocate at least 15% of total budget to health in line with the Abuja Declaration³



FP 2020 COMMITMENT

In 2017, the Federal Government updated its FP2020 commitment by pledging to allocate \$4 million each year to the procurement of contraceptives for the public sector.⁴



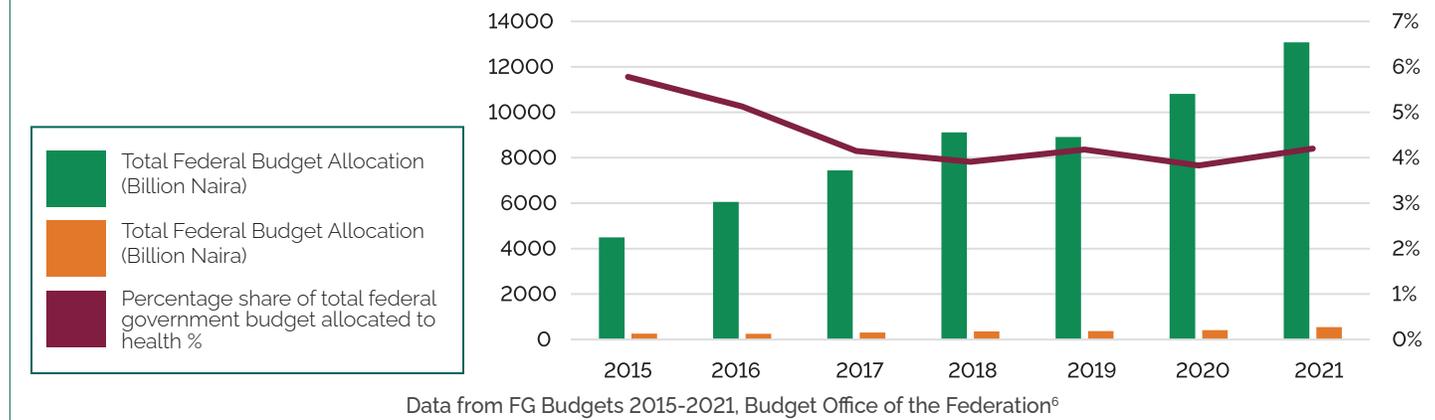
NATIONAL FAMILY PLANNING BLUEPRINT

The revised National Family Planning Blueprint 2020-2024 aims to increase mCPR to 27% by 2024⁵

CURRENT SITUATION OF HEALTH AND FP FINANCING BY THE FEDERAL GOVERNMENT

Health budget allocation and expenditure remain consistently below 6% of those of the total government budget, which is far below the Abuja Declaration commitment of 15% (see Figure 2). As a result, the health sector faces a considerable funding gap, thus hampering the achievement of key human capital development targets.

Figure 2: Health sector allocation as a proportion of total FG budget (2015-2021).

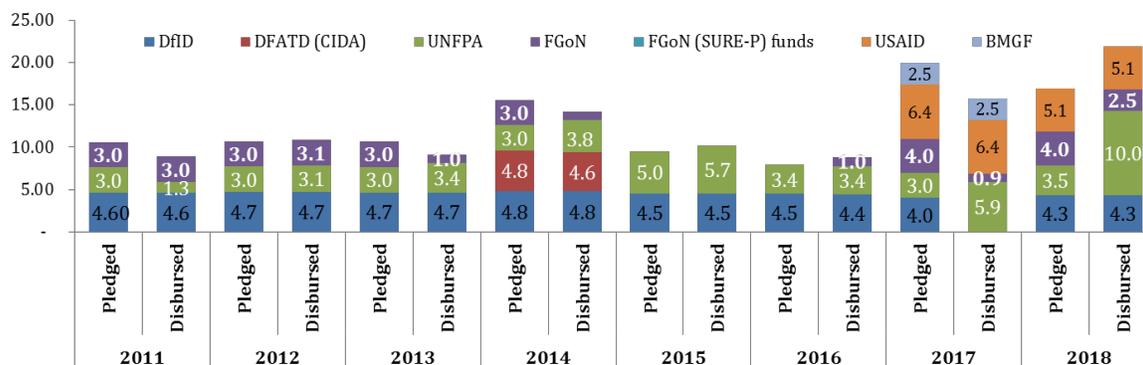


MAJOR CHALLENGES FACED IN HEALTH AND FP FINANCING AT FEDERAL AND STATE LEVELS

Although the federal government has been meeting up with the FP2020 financing commitment of allocating \$4 million for commodities in the last few years, it still constitutes a small proportion of FP financing. Despite the external push towards domestic financing, donors still fund a substantial part of the commodity budget in Nigeria. This is not sustainable, particularly in the current context where donors are under pressure to reduce their aid budgets.



Figure 3: pledged and disbursed funds for FP commodities by donor and federal government, 2011 – 2018 (\$ million)⁷



Source: Funding Contraceptives in Nigeria Report, Clinton Health Access Initiative⁷

Figure 4 shows that Lower Middle-Income Countries (LMICs) spent an average of 1.33% of domestic General Government Health Expenditure (GGHE) on Family Planning in 2018, while Nigeria only spent 0.09%. This further highlights the sub-optimal prioritization of FP in Nigeria.

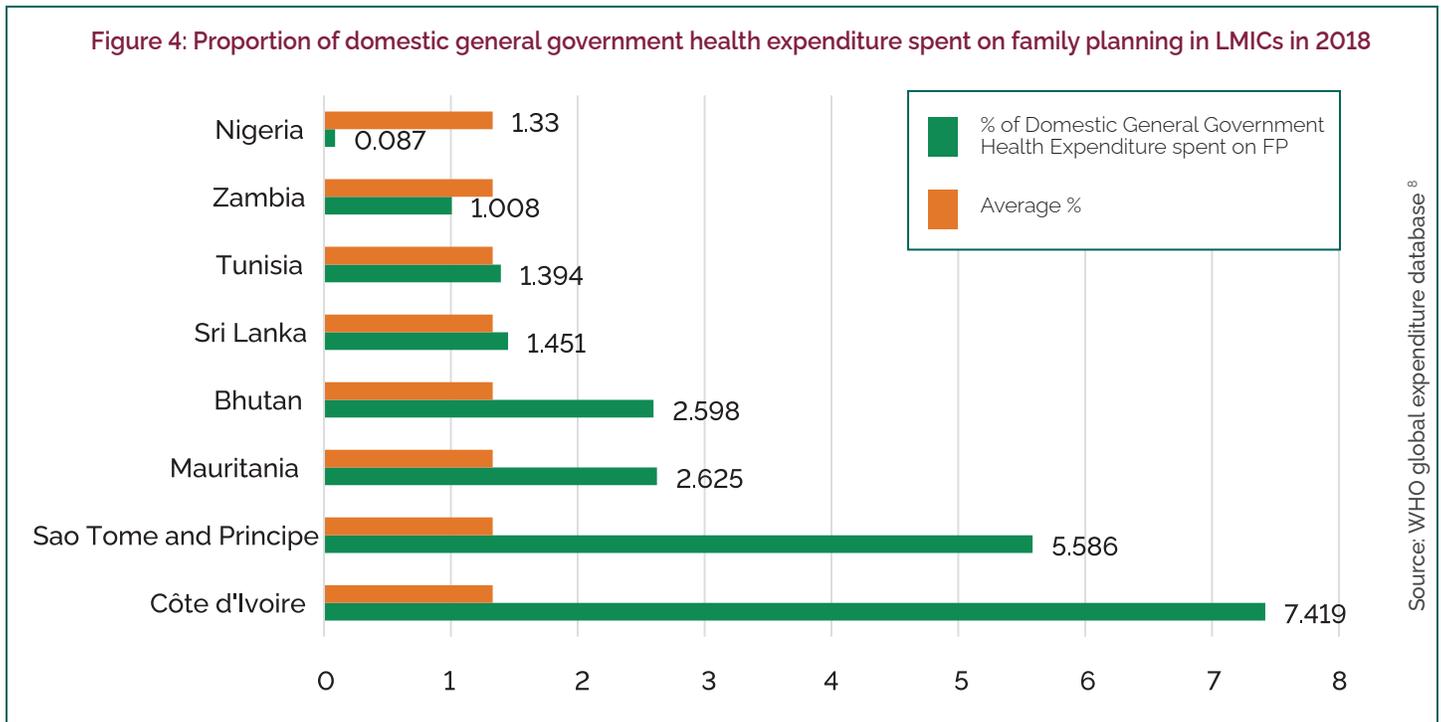
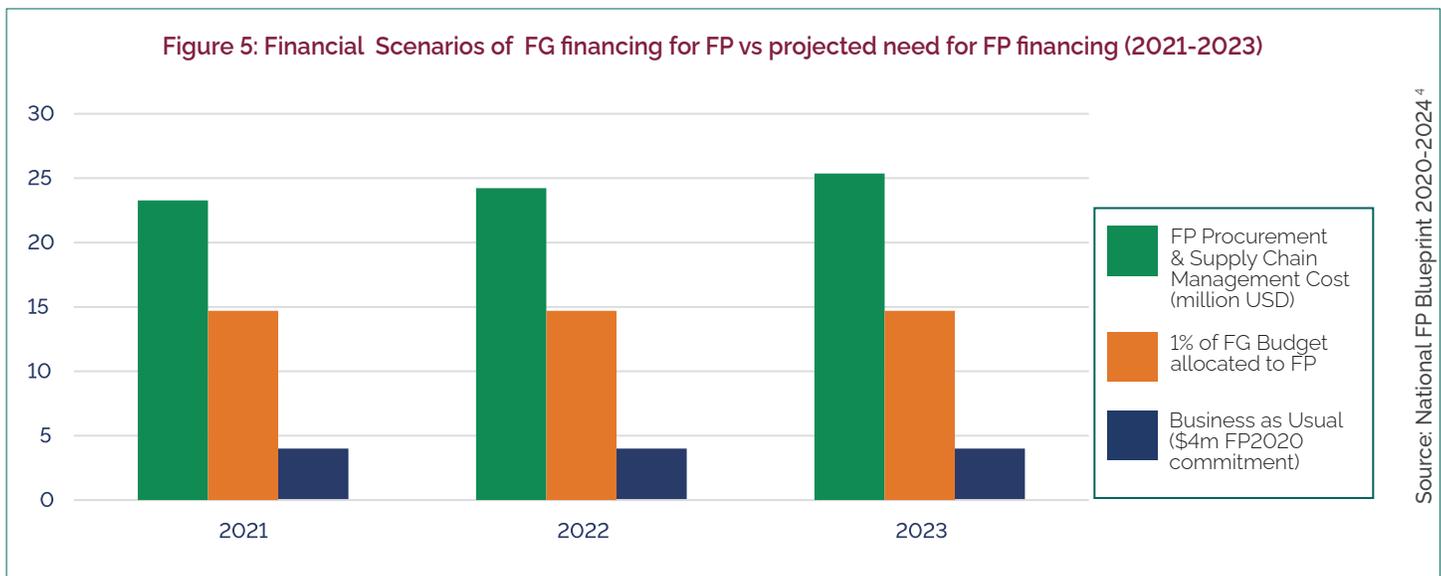


Figure 5 shows the estimated gap in funding for FP procurement and supply chain management if the current level of government financing, i.e. \$4 million USD commitment is not increased (i.e. Business as Usual). On the other hand, it shows the potential additional funding that can be accrued, with a significant gap covered if instead, 1% of federal government health budget is allocated to family planning commodities (based on 2021 health allocation), using the LMICs average GGHE on family planning as a benchmark. This would account for more than three times the status quo.



WHY INVEST IN FAMILY PLANNING

Countries that adequately invest in family planning experience earlier and longer increases in labor productivity, facilitating enduring economic growth¹⁰

Family planning is an essential ingredient for Nigeria to realize the accelerated economic growth known as the Demographic Dividend¹¹

When combined with other facilitating investments, family planning can boost GDP per capita in Nigeria by nearly 30% by 2050¹¹

Nigeria's low mCPR and high unmet need contribute to the high total fertility rate which has a negative impact on key human capital development indicators such as maternal mortality, educational attainment, and female labour force participation. It also results in a total dependency ratio of 88 (i.e. number of dependents, aged 0–14 and over 65, to the total working age population, 15–64), which is higher than the average for Sub-Saharan Africa (86). Likewise, the youth dependency ratio (i.e. ratio of the youth population aged 0–14 per 100 people of working age, 15–64) is 87. As shown in the graph below (Fig 6), a very high proportion of the Nigerian population is aged 0–14 (44%), in stark contrast to the typical country in Asia. In 2015, there were 110 people of working age for every 100 dependents in Nigeria, compared to the average of 260 working age population per 100 dependents in East Asia". By investing in family planning alongside education and employment, Nigeria could kick start demographic transition, harness the demographic dividend and achieve sustainable economic growth.

NIGERIA'S HIGH UNMET NEED FOR FAMILY PLANNING

19% OF MARRIED WOMEN

HAMPERS ACHIEVEMENT OF HUMAN CAPITAL DEVELOPMENT

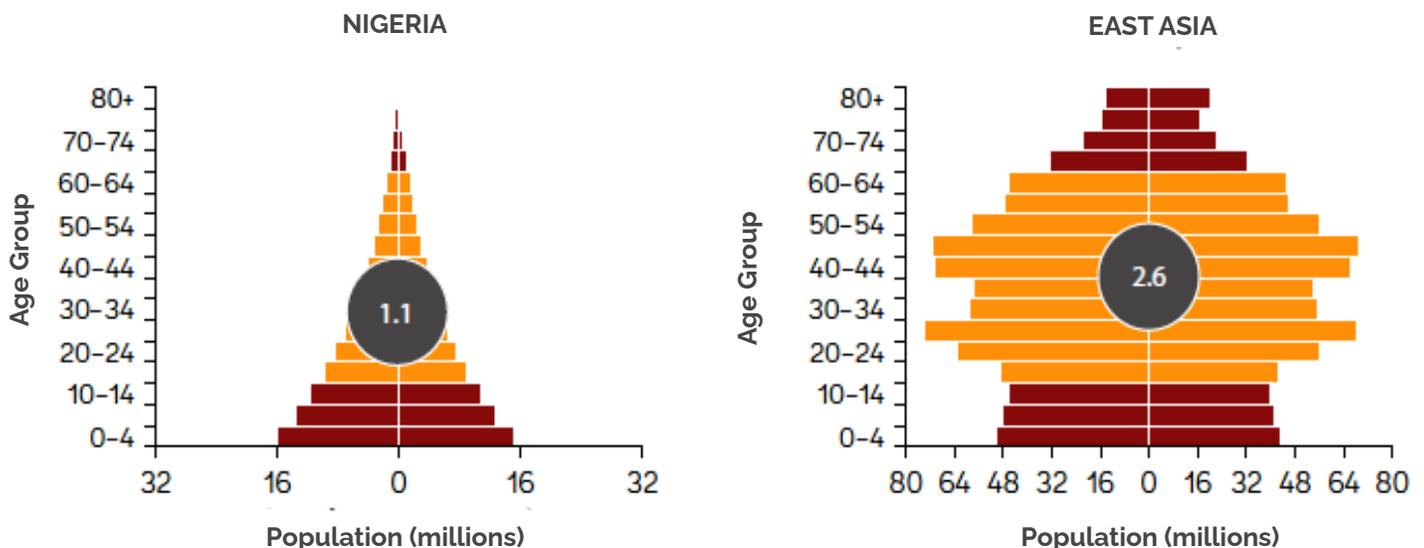


IT REDUCES
OUTCOMES OF
INDIVIDUAL
CHILDREN

IT REDUCES
WOMEN'S
PARTICIPATION
IN THE LABOUR
FORCE

IT INCREASES
MATERNAL
MORTALITY

Figure 6: Population pyramids and working age to dependent population ratios in Nigeria and East Asia¹²



CALL TO ACTION



The Federal Ministry of Health should reprioritize Family Planning by allocating 1% of total health budget to FP financing, as shown in Graph 4 above



The Federal Ministry of Finance should prioritize timely and complete release of funds



Governors and Commissioners for Health should create budget line for Family Planning in the states, and commit at least 1% of health budget to Family Planning



Governors and Commissioners for Finance should prioritize health sector and Family Planning budget releases



National Assembly and State Legislature should use their appropriation function to ensure that the 1% of health budget is allocated to family planning and consider forming FP advocacy group.

References

1. National Population Commission, "Nigeria Demographic and Health Survey (NDHS) 2018 ." Abuja, Nigeria, 2018. Accessed: Jan. 20, 2021. [Online]. Available at: www.DHSprogram.com.
2. Federal Government of Nigeria (2018). Nigeria's Vision to Accelerate Human capital Development by 2030, Abuja
3. 'African Summit on HIV/AIDS, Tuberculosis and other related Infectious Diseases Abuja, Nigeria 24-27 APRIL 2001 OAU/SPS/ABUJA/3. Abuja Declaration on HIV/AIDS, Tuberculosis and other related Infectious Diseases." Available at: <https://au.int/sites/default/files/pages/32894-file-2001-abuja-declaration.pdf> Accessed: Feb. 10, 2021. [Online].
4. FAMILY PLANNING 2020 COMMITMENT GOVT. OF NIGERIA. Available at: http://www.familyplanning2020.org/sites/default/files/Nigeria_FP2020_Commitment_2017.pdf Accessed: Feb. 10, 2021. [Online].
5. Federal Ministry of Health, "Nigeria Family Planning Blueprint 2020–2024," 2020. [Online]. Available: <https://health.gov.ng/doc/Final-2020-Blueprint.pdf>.
6. "Budget Document - Budget Office of the Federation - Federal Republic of Nigeria." <https://www.budgetoffice.gov.ng/index.php/resources/internal-resources/budget-documents> (accessed Jan. 22, 2021).
7. Clinton Health Access Initiative, "Funding Contraceptives in Nigeria," 2020.
8. WHO Global Expenditure Database
9. Guttmacher Institute. 2021. Investing in Sexual and Reproductive Health in Low- and Middle-Income Countries | Guttmacher Institute. [ONLINE] Available at: <https://www.guttmacher.org/fact-sheet/investing-sexual-and-reproductive-health-low-and-middle-income-countries>.
10. Marlene Lee, Kaitlyn Patierno, and Elizabeth Leahy Madsen. (2020). Investments in Family Planning and
11. Education Drive Labor Productivity. Population Reference Bureau
12. Moreland, S. (2017). Can Nigeria attain a demographic dividend? African Population Studies, 31(1). doi:<https://doi.org/10.11564/31-1-1002>
13. Prospects 2015 Revision UN Population Division, 2015. World Population